

## State of Idaho

Ben Ysursa

Secretary of State

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Date prepared

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THIS	SPACE FOR	OFFICE	USE (	ONLY	,

To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

LOBBYIST REPORT FORM

SCANNED

2007 FEB - 1 AM 9: 12

Period covered

(Type or print clearly in black ink)
See instructions at bottom of page
Lobbyist's name and permanent business address

Mike O'Bleness 555 West 25th Street Idaho Falls, ID 83402 KX

year ending

January 26,2007

(Mo.) (Day) (Yr.)

12 | 31 | 2006

Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.									er.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			*Total Amount for Item 3		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
			All Employers	Employer No. 1		Employer No. 2		Employer No. 3		Employer No. 4	
Entertainment Food and Refreshment			\$	\$		\$		\$		\$	
	Accommodat	ions									
Adverti	ising										
Travel											
Telepho	one										
Other Expenses or Services											
		Total	\$	\$		\$		\$		\$	
*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page							n Page 1.				
Item	tem The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials.										
2	Date		Place		Amount	N	Names of Legislators, Public and Executive Offi			ve Officials i	in Group

Item	The totals of	of each expenditure of more than fifty dollars (\$50)	) for a legislator, o	other holder of public office, and executive officials.			
2	Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group			
		NONE					
				·			

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1	Development Workshop, Inc. 555 West 25th Street Idaho Falls, ID 83402
Filing deadline: Annual report is due on January 31st.  Executive Lobbyist semi-annual report due July 31st.	No. 2	
TO BE FILED WITH:  Ben Ysursa  Secretary of State	No. 3	
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 4	

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.												
	D	ate	Amount		Name	me of Legislator, Public or Executive Official Receiving or Benefiting							
Item 5 Subject	or Ho the Lo	use Bill, l obbyist w Bill, Re	NONE of proposed legislat Resolution or other as supporting or of solution or Other ve Ident. Number	legislative activi	ty in which	01	LEGISLATIVE SUB  Subject Agriculture, horticulture, farming, and livestock		Subject Health service, medicine, drugs and controlled substances, health				
11 11		Bil	1 547	SB 1458 HB 190		02 03 04 05 06 07 09 10 11 12 13 14 15 16	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, municipal Government, special districts Government, state  Committee	18 19 20 21 22 23 24 25 26 27 28 29 30 31) muni	insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)  ty Rehab Program				
Item 6	con	tract bid	rule, ratemaking of bid process, fin was supporting or	ancial services ag		L	ERTIFICATION: I hereby certify the precit statement in accordance with a cobbyist signature  Plant of the precipitation of the precipit						
						Eı	mployer No. 2 signature  mployer No. 3 signature  mployer No. 4 signature		Date  Date				